Fee Paid (\$)

Fees Paid (\$)

65.00

Fee (\$)

PTO/SB/17 (12-04v2)
Approved for use through 7/31/2006. OMB 0651-0032
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Under the Paperw	ON READER ACT OF 19	95, no person are n	equired to	respond to a collection	n of informa	ation unless it displa	ys a valid OMB	control number	
Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).				Complete if Known					
				Application Number 10/532,5		10/532,596-C	onf. #9444		
FEE TRANSMITTAL			Filing Date		April 25, 2005				
			First Named Inventor		Laurence Lassalle				
For FY 2005			Examiner Name		Not Yet Assigned				
X Applicant claims small entity status. See 37 CFR 1.27			Art Unit N/A						
TOTAL AMOUNT OF PAYMENT (\$) 105.00		Attorney Docket No.		M0025.0328/P328					
METHOD OF PAYMENT (check all that apply)									
Check x Credit Card Money Order None Other (please identify):									
x Deposit Account Deposit Account Number: 04-1073 Deposit Account Name: Dickstein Shapiro Morin & Oshinsky LLP									
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)									
x Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee									
Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17									
FEE CALCULATION									
1. BASIC FILING, SEARCH, AND EXAMINATION FEES									
Ì	FIL	ING FEES	SE	ARCH FEES	EXAMI	NATION FEES			
Application Type	Fee (\$)	Small Entity Fee (\$)	Fee (\$	Small Entity) Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees Pa	aid (\$)	
Utility	300	150	500	250	200	100			
Design	200	100	100	50	130	65			
Plant	200	100	300	150	160	80			
Reissue	300	150	500	250	600	300			
Provisional	200	100	0	0	0	0			
2. EXCESS CLAIM	FEES						5	Small Entity	
Fee Description							Fee (\$)	Fee (\$)	
Each claim over 20	(including Reissu	es)					50	25	
Each independent of				200	100				
Multiple dependent claims							360	180	
Total Claims	Extra Claims	Fee (\$)	Fee F	Fee Paid (\$)		Multiple Dependent Claims			
- =	· x	= _			E	ee (\$)	Fee Paid (\$)	<u> </u>	
Indep. Claims	Extra Claims	Fee (\$)	Fee F	Paid (\$)				_	
acp. Glanija	-Aud Oldinia	<u> </u>		<u>\</u>					

Other (e.g., late filing surcharge): 2051 Surcharge-Late oath or declaration 8021 Recording each patent assignment, agreement or ... 40.00 SUBMITTED BY Registration No. (Attorney/Agent) Signature 31,063 Telephone (202) 828-4879 Date October 18, 2005 Name (Print/Type) Stephen A. Soffen

Number of each additional 50 or fraction thereof

(round up to a whole number) x

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50

sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

10/21/2005 GFREY1

00000124 10532596

3. APPLICATION SIZE FEE

Total Sheets

4. OTHER FEE(S)

01 FC:2617

65.00 OP

Extra Sheets

Non-English Specification, \$130 fee (no small entity discount)

PTO/SB/21 (09-04)

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Application Number 10/532,596-Conf. #9444 Filing Date **TRANSMITTAL** April 25, 2005 First Named Inventor **FORM** Laurence Lassalle Art Unit N/A (to be used for all correspondence after initial filing) Examiner Name Not Yet Assigned Attorney Docket Number M0025.0328/P328 Total Number of Pages in This Submission

ENCLOSURES (Check all that apply)									
x Fee Transm	nittal Form	Drawing(s)		After Allowance Communication to TC					
x Fee Attached		Licensing-related Papers		Appeal Communication to Board of Appeals and Interferences					
Amendment/Reply		Petition		Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)					
After Final		Petition to Convert to a Provisional Application		Proprietary Information					
Affidavits/declaration(s)		Power of Attorney, Revocation Change of Correspondence Address		Status Letter					
Extension of Time Request		Terminal Disclaimer		Other Enclosure(s) (please Identify below):					
Express Abandonment Request		Request for Refund		Combined Declaration and Power of Attorney					
Information Disclosure Statement		CD, Number of CD(s)		Part 2 Copy of Notice					
Certified Copy of Priority Document(s)		Landscape Table on CD							
X Reply to Missing Parts/ Incomplete Application		Remarks							
X Reply to Missing Parts under 37 CFR 1.52 or 1.53									
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT									
DICKSTEIN SHAPIRO MORIN & OSHINSKY LLP									
Signature Stephand									
Printed name	Stephen A. Soffen								
Date	October 18, 2005		Reg. No.	31,063					

Rec'd PCT/PTO 18 OCT 2005

Docket No.: M0025.0328/P328 (PATENT)

THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:

Laurence Lassalle

Application No.: 10/532,596

Filed: April 25, 2005

For: VISUAL INDICATING DEVICE

Confirmation No.: 9444

Art Unit: N/A

Examiner: Not Yet Assigned

RESPONSE TO NOTICE OF MISSING REQUIREMENTS OF APPLICATION

MS Missing Parts Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

In response to the Notice to File Missing Requirements of Application – Filing Date Granted mailed October 7, 2005, Applicant respectfully submits a Combined Declaration and Power of Attorney, Part 2 Copy of Notice, and an Assignment for recording.

Please charge our Credit Card in the amount of \$105.00 covering the fee set forth in 37 CFR 1.16(f) and 1.21(h). Credit Card Payment Form SB-2038, with a signature from an authorized cardholder, is enclosed. The Director is hereby authorized to charge any deficiency in the fees filed, asserted to be filed or which should have been filed herewith (or with any paper hereafter filed in this application by

Application No.: 10/532,596 Docket No.: M0025.0328/P328

this firm) to our Deposit Account No. 04-1073, under Order No. M0025.0328/P328. A duplicate copy of this paper is enclosed.

Dated: October 18, 2005

Respectfully submitted,

Stephen A. Soffen

Registration No.: 31,063

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